

# 2011 Military Health System Conference

## HOSPITAL CORPSMAN UNIVERSITY From the Classroom to the Bedside

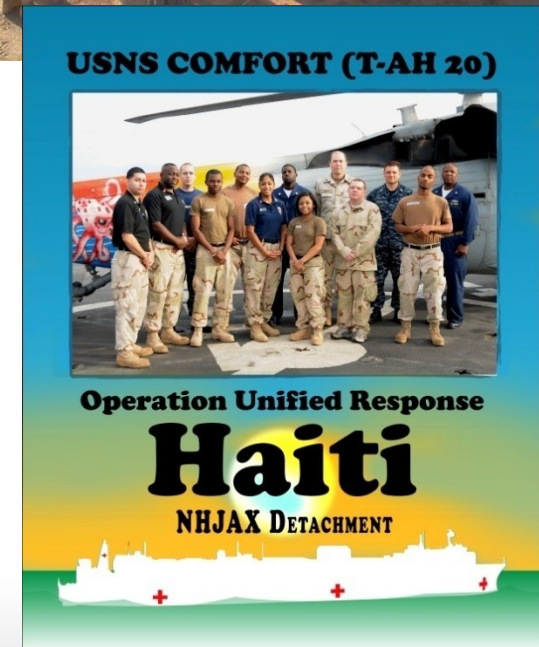
HMCS(FMF/SW/EXW) Michael Holmes, IDC  
Naval Hospital Jacksonville



# Mission



- Develop and train Corpsmen in preparation for assignment to our hospital, branch health clinics, operational units and tactical environments within 90 days of assignment to our facility



# Vision



- In conjunction with mission specific, just-in-time-training, the HMU graduate is employable and deployable across the full range of military and clinical operations



# Guiding Principles



- HMU students are:
    - Front-line life savers in training for operational utilization
    - Foundation of Navy Medicine
    - Advocates for patient safety and excellence in healthcare
    - Care extenders for medical and nursing staff
- 2011 NHS Conference through Navy Medicine





# Learning Objectives



- Why HMU?
- Review universal training requirements for hospital or clinic-based Hospital Corpsman
- Discuss roles within HMU
- Outline implementation



# Welcome to Navy Medicine



- Imagine you are an 18-year-old Corpsman fresh out of Corps School...
  - Within a week of arrival at your new hospital or clinic you find yourself at a patient's bedside trying to remember exactly how to take a blood pressure or draw blood which was a skill you learned just a few weeks ago.

# You've Been in How Long?



- Now remember what it was like to RECEIVE that brand new Corpsman to your ward and think, "The Corpsmen coming from Corps School just get smarter and smarter but there is still so much they need to learn..."

# Why HMU?



- Started in response to lack of centralized and standardized training
  - Bedside training was conducted at departmental level which meant labor and delivery Corpsmen were not very interchangeable with dermatology Corpsmen





# Why HMU? (cont.)



- Other benefits to centralized training include:
  - Junior Corpsmen can be evaluated, vetted and recommended for potential assignment to high-risk patient care areas such as the ED, L&D and ICU
  - In-depth staff orientation to the facility
  - Direct oversight of patient care by staff



# Why HMU? (cont.)



- Other benefits:
  - Professional relationships with nursing staff promotes a better understanding of patient and family centered care.
  - Side-by-side relationship with nursing staff increases basic understanding of anatomy & physiology, terminology, assessment, medication administration



# Training Requirements



- HMU also designed to provide all training required by the Navy, Bureau of Medicine and Surgery, Navy Knowledge Online, Individual Augmentee program, Joint Commission standards, and NH Jax





# Training Requirements (con



- HMU students are required to complete 39 electronic or classroom based training courses to graduate from the program
- Complete age specific competencies and the eleven part departmental orientation

# Roles and Responsibilities



- Senior Enlisted Leadership
  - SELs must accept 60-90 day loss of their prospective gain to allow for HMU
  - SELs universally support high standards of training required in program and widely regard it as a necessary investment of manpower to further develop well rounded Corpsmen capable of working in any





# Roles and Responsibilities

(cont.)



- Directorate Leadership
  - Latitude to direct enlisted manpower is critical across all directorates
  - The Director for Nursing Services' (DNS) engagement in promoting and guiding Nurse Corps involvement.

# Roles and Responsibilities

(cont.)



- DNS Departmental Leadership
  - The Department Head, Chief and Leading Petty Officer all play crucial roles in directing pre assignments and effective scheduling of HMU students
  - Lessons learned are funneled in real-time back to the course director and manager to quickly address concerns



# Roles and Responsibilities

(cont.)



- Clinical Nurse Specialists
  - Act as program advocates for nursing staff as well as preceptors for all HMU students when assigned preceptors are unavailable
  - Orchestrate and often teach Thursday classroom briefs based on input gained from contact with both staff and students

# Roles and Responsibilities

(cont.)



- Nursing Staff
  - Foundation of effective Corpsmen training in the clinical environment
  - Military and civilian nurses alike are utilized and directed to participate as preceptor



# Roles and Responsibilities

(cont.)



- Hospital Corps Staff
  - Provide insight to nursing staff and students alike as to roles and responsibilities of Hospital Corpsmen
  - Crucial member in effective training at bedside
  - Often first to “teach one” to the new student
  - Provide valuable insight to students on just how to be a Sailor



# Implementation



- Human Resources Department (HRD)
  - A key component to the management strategy is limiting visibility of student's ultimate duty assignment
  - Adding the ability of earning a “choice” assignment based on HMU performance proved beneficial

# Implementation (cont.)



- HRD and HMU management work closely to place the right Corpsman in the right job at the right time
  - ED, ICU, L&D, females to OB/GYN -- males to Urology
  - HMU provides a manpower source for unanticipated assignments



# Implementation (cont.)



- Clinical Rotations
  - Mon-Fri, 0700-1500 and 1500-2300
  - Three weeks per department
  - Staff Corpsmen who have demonstrated a deficiency in clinical skills can be sent back through the clinical portion of program



# Implementation (cont.)



- Personnel Assignments
  - Assign a program champion
  - Assign a program director and program manager
  - Collaborate with CNSs to determine their level of involvement and role
  - Brief Nurses and Corps staff on expectations



# Implementation (cont.)



- Administrative Requirements
  - List all personnel authorized locally to sign off the HMU book and add to HMSB signature authority memorandum
  - Determine clinical capabilities and how student rotations will fit into them
  - Front load administrative training requirements so as to not interfere with clinical training
  - Talk it up! Frequent and regular promotion of program from top down key to success



# Implementation (cont.)



- Classroom Time
  - One, 2-hour session per week
  - Necessary part of advanced training and also promotes a better understanding of advanced concepts learned at bedside
  - Offers students a place to voice questions raised after further study away from bedside
  - CNSs schedule guest lecturers

# Implementation (cont.)



- Medical versus Non-Medical Watches
  - HMU students are prohibited from working on command watch standing Personnel Qualification Standards or standing non-medical watches
  - HMU students are rotated throughout the hospital as medical assistants assigned weekly

# Implementation (cont.)



## Sample Non-Clinical Rotation Schedule

HMU ROTATION SCHEDULE

NAME	TIME	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24
ROGERS	1300-1500	PED	PED	VETE RAN' S DAY	CLAS SROO M	PED			SD	SD	SD	CLAS SROO M	SD		18-22	ENT	ENT
GREENE	1300-1500	CSS	CSS			CSS			PED	PED	PED		PED			SD	SD
RAY, A	1300-1500	ORT	ORT			ORT	18-22		CSS	CSS	CSS		CSS			PED	PED
HAYNES	1300-1500	URO	URO			URO		18-22	ORT	ORT	ORT		ORT			CSS	CSS
SHABAZZ	1300-1500	LAB	LAB			LAB			PT	PT	PT		PT	18-22		PHA	PHA
HAYNES, C	1500-1700	DER	DER			DER			URO	URO	URO		URO	06-10		ORT	ORT
RODRIGUEZ	1500-1700	PHA	PHA			PHA			DER	DER	DER		DER	10-14		URO	URO
BURROUGHS	1500-1700	PT	PT			PT			PHA	PHA	PHA		PHA	14-18		DER	DER
JAMES, H	1500-1700	LAB	LAB			LAB			PT	PT	PT		PT		06-10	PHA	PHA
ESPINOSA	1500-1700	PAC	PAC			PAC			LAB	LAB	LAB		LAB		10-14	PT	PT
BRUBAKER	1500-1700	OB	OB			OB			PAC	PAC	PAC		PAC		14-18	LAB	LAB
BARNETT	1500-1700	DEN	DEN			DEN	06-10		OB	OB	OB		OB			PAC	PAC
GRUNDY	1500-1700	IMM	IMM			IMM	10-14		DEN	DEN	DEN		DEN			OB	OB
LUANGLATH	1500-1700	GS	GS			GS	14-18		IMM	IMM	IMM		IMM			DEN	DEN
FLETCHER	1500-1700	RAD	RAD			RAD		06-10	GS	GS	GS		GS			IMM	IMM
JACKSON	1500-1700	ENT	ENT			ENT		10-14	RAD	RAD	RAD		RAD			GS	GS
DERAS	1500-1700	SD	SD			SD		14-18	ENT	ENT	ENT		ENT			RAD	RAD

# Assessments



- Students are tested
  - Baseline
  - Midterms
  - Finals
  - Unit tests
- Graduates are interviewed
- SELs and LCPOs are solicited for feedback for program improvements and internal/external customer needs

# Challenges and Pitfalls



- Student drops
- Student does not complete program within allotted 90 days
- Avoid stereotyping students
- SEL/LPO exposure to students



# Benefits to the Sailor



- Early intrusive leadership and mentorship
  - Financial counseling
  - Security clearance verification
  - Initial Career Development Board (CDB)
  - NSIPS/ESR, NFAAS access
- Most importantly we promote the ideal of professionalism and teamwork

# Benefits to the Department



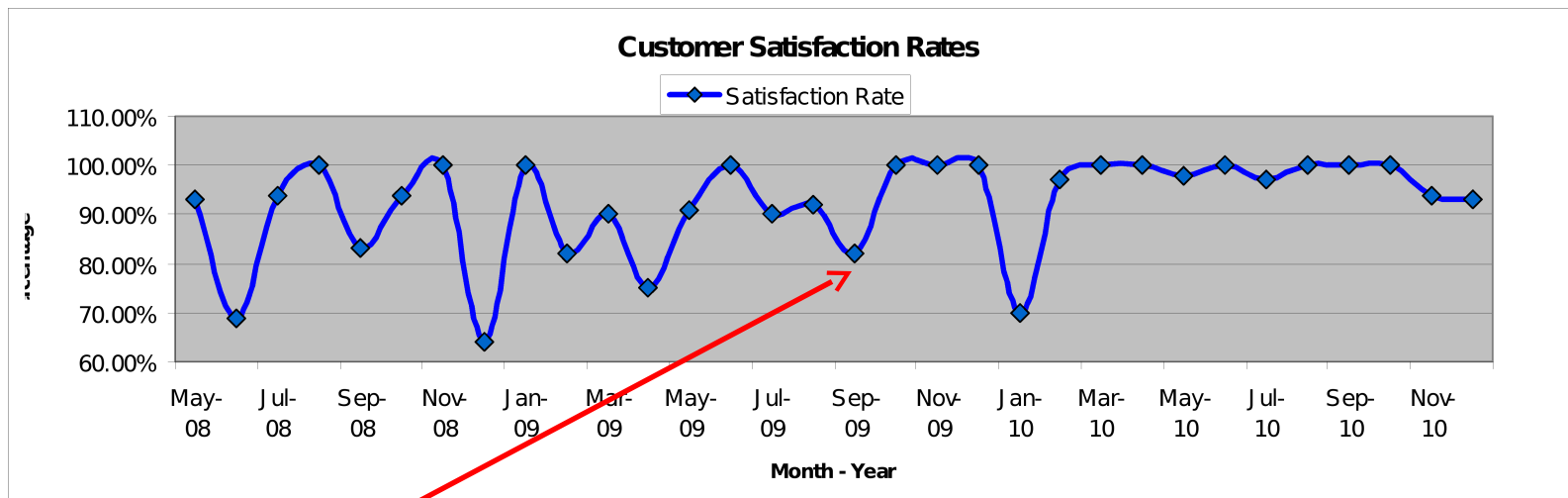
- Corpsmen report ready for departmental orientation without any interruptions
- Graduates report with all training recorded in FLT MPS/DMHRSI and certificates in hand
- Division Officer training folder is built
- Have a professional Sailor with good working knowledge of our healthcare system

# Benefits to the Command



- Eight percent increase in customer satisfaction rates command-wide
- Non-Judicial Punishments decreased by 26.1%
- IMR increase of eight percent (FMR)
- Graduated 152 students to date

# Positive Patient Care



## HMU Program Begins

Our inpatient customer satisfaction rates were 85-90%. Now they remain at or near 100%.

# The Way Ahead



- Ownership by DNS versus CPE
- Formal OJT program aims to expound on the Corps School curriculum, not just reinforce it
- Graduation



- Program Director
  - HMCS(FMF/SW/EXW) Michael Holmes, IDC  
[michael.j.holmes@med.navy.mil](mailto:michael.j.holmes@med.navy.mil)  
(904)542-7087
- Program Manager
  - HM1(SW) Christy Eads  
[christy.eads@med.navy.mil](mailto:christy.eads@med.navy.mil)  
(904)542-6546

Course materials may be obtained by sending me an email at:  
**[michael.j.holmes@med.navy.mil](mailto:michael.j.holmes@med.navy.mil)**